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CONFIRMATION NO. 3322

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/007,700	11/30/2001 RULE	514	1632	210121.455C17	
APPLICANTS Tongtong Wang, Medina, WA; Robert A. Henderson, Edmonds, WA; Teresa M. Foy, Federal Way, WA;					
** CONTINUING DATA ***** This application is a CIP of 09/897,778 06/28/2001 ABN which is a CIP of 09/850,716 05/07/2001 ABN which is a CIP of 09/735,705 12/12/2000 which is a CIP of 09/685,696 10/09/2000 ABN which is a CIP of 09/662,786 09/15/2000 ABN which is a CIP of 09/643,597 08/21/2000 PAT 6,426,072 which is a CIP of 09/630,940 08/02/2000 PAT 6,737,514 which is a CIP of 09/606,421 06/28/2000 PAT 6,531,315 which is a CIP of 09/542,615 04/04/2000 PAT 6,518,256 which is a CIP of 09/510,376 02/22/2000 ABN which is a CIP of 09/480,884 01/10/2000 PAT 6,482,597 which is a CIP of 09/476,496 12/30/1999 PAT 6,706,262 which is a CIP of 09/466,396 12/17/1999 PAT 6,696,247 which is a CIP of 09/285,479 04/02/1999 PAT 6,821,518 which is a CIP of 09/221,107 12/22/1998 PAT 6,660,838 which is a CIP of 09/123,912 07/27/1998 PAT 6,312,695 which is a CIP of 09/040,802 03/18/1998 ABN					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/25/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no		STATE OR COUNTRY WA	SHEETS DRAWING 0	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged		Examiner's Signature		Initials	
ADDRESS 00500					
TITLE COMPOSITIONS AND METHODS FOR THE THERAPY AND DIAGNOSIS OF LUNG CANCER					
		<input type="checkbox"/> All Fees			
		<input type="checkbox"/> 1.16 Fees (Filing)			

FILING FEE RECEIVED 1260	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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